

ACMD

Advisory Council on the Misuse of Drugs

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Rt Hon. Lynne Featherstone MP

Minister for Crime Prevention

Home Office

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Rt Hon. Earl Howe

Parliamentary Under Secretary of State for Quality

Department of Health

Richmond House

79 Whitehall

London, SW1A 2NS

25 March 2015

Dear Ministers,

Re: Electronic Prescribing Service (EPS) for Schedules 2 and 3 Controlled Drugs

I am writing to provide you with the Advisory Council on the Misuse of Drugs' (ACMD) advice on the joint Department of Health and Home Office proposals to enable the Electronic Prescribing Service (EPS) for Schedules 2 and 3 controlled drugs.

The Advisory Council on the Misuse of Drugs (ACMD) first considered the issue of extending EPS in 2009, when the Department of Health presented proposals to allow the electronic prescribing of Schedules 2 and 3 controlled drugs. This issue was again brought to the attention of the ACMD's Technical Committee in September 2014.

The ACMD in January 2015 received representations in relation to final proposals to enable the extension of EPS to Schedules 2 and 3 controlled drugs following the Department of Health's public consultation¹.

¹ <https://www.gov.uk/government/consultations/extending-the-scope-of-the-electronic-prescription-service>

The ACMD supports the proposal to enable prescribing of Schedules 2 and 3 controlled drugs using EPS and believes this will improve patient care as well as reduce diversion and illicit supply.

The ACMD strongly recommends that the current regulations for the writing of totals 'in words and figures' should still be required for electronic prescriptions for Schedules 2 and 3 controlled drugs including community (primary care) prescribing, hospital outpatient prescribing / take home prescribing, A & E and home visits. This will ensure consistency with paper prescriptions and help reduce dispensing errors.

The ACMD strongly recommends that the 'Advanced Electronic Signature' standard should be mandatory for the electronic prescribing of Schedules 2 and 3 controlled drugs.

The ACMD requests confirmation that the proposals will fully accommodate the handling of interval dispensing, such as currently available on FP10-MDA forms. Specifically, the electronic system must be able to handle a wide range of instalment prescribing, such as the 'special instructions' and examples set out in Appendix 3 of 'Drug misuse and Dependence – UK Guidelines on clinical management' (Department of Health).

The ACMD believes that options should be afforded to patients to request a paper prescription in addition to EPS, to act as an aide-memoire for vulnerable patients. This is particularly important for interval dispensing where there is a risk of missed doses when a pharmacy is closed.

It is also important that the option of existing, paper based prescriptions, is retained as prescribing for drug dependency takes place in many clinical settings (such as third sector buildings in the community) that are unlikely to be on the secure NHS N3 internet spine for some time to come.

The ACMD is content for private Schedules 2 and 3 controlled drug prescriptions to also be prescribed electronically, though strongly recommend that this is contingent on compliance with the 'Advanced Electronic Signature' standard and other security standards required of NHS prescribers. The ACMD would also like to seek assurances of contingency measures in the event of computer/network outages.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Les Iversen', written in a cursive style.

Professor Les Iversen FRS (Chair of ACMD)